

**2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Mar 24, 2009  
Secretary of State**

DOCUMENT# 731063

Entity Name: WEST TRADE CONDOMINIUM, INC.

**Current Principal Place of Business:**

3239 WEST TRADE AVENUE  
COCONUT GROVE, FL 33133 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O VALLEDOR CO. - #205  
MIAMI, FL 33145 28

**New Mailing Address:**

C/O VALLEDOR CO. - #205  
1450 CORAL WAY  
MIAMI, FL 33145 28

FEI Number: 59-1769889      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VALLEDOR, ROBERT L  
1450 CORAL WAY  
SUITE 1  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT L. VALLEDOR

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MAXERA, MARGARITA M  
Address: 3239 WEST TRADE AVENUE, #7  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: S/T ( ) Delete  
Name: LUIS, MEJER  
Address: 3239 WEST TRADE AVENUE, #8  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: VP ( ) Delete  
Name: YAMIL, SOCARRAS  
Address: 3239 WEST TRADE AVENUE, #5  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: DIR ( ) Delete  
Name: GLACCUN, DIANA  
Address: 3239 WEST TRACE AVENUE, #2  
City-St-Zip: COCONUT GROVE, FL 33133 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: SHMALO, STEVE  
Address: 3239 WEST TRADE AVENUE, #10  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT L. VALLEDOR

RA

03/24/2009

Electronic Signature of Signing Officer or Director

Date